FAMILY WELFARE (MISS KUMUDBEN M. JOSHI): (a) and (b) Presently, reduction of morbidity and disability is implemented by early detection and treatment through the network of health services provided by the Employees State Insurance Corporation, Environmental hygiene measures which are also instrumental in reducing morbidity, disability and mortality are implemented through inspection services under the Acts of Factories, Mines and Plantation etc. administered by the Central & State Ministries of Labour. Most of the large industrial units in the private and public sectors have well developed occupational health services Which include periodic assessment of the work jenvironment, health of the workers and environmental hygiene measures. Researches into occupational health and environmental hygiene are also undertaken by the National Institute of Occupational Heaflth, Ahjmsdabad under the aegis of the Indian Council of Medical Research.

Reduction in Leprosy Cases

1584. SHRI M. BASAVARAJU: Win the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

Ca) which are those areas where there has been and also those where there has not been much reduction in leprosy cases in the recent past, as assessed by his Ministry and

(b) what steps Government have taken for covering all the endemic areas so that no leprosy patient goes without getting proper medical treatment?,

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (MISS KUMUDBEN M. JOSHI): (a) The disease is showing a downward trend throughout the country in general as is evident from the decline in prevalence rate from 5.93 per thousand in 1,971 to 5.77 per thousand in 1981. A reduction is marked in the States having high endemic areas, such as, Andhra Pradesh, Tamil Nadu, West Bengal, UT of Lakshadweep and Pondicherry. State-wise position of prevalence rate is given in the annexure.

(b) Unaer the National Leprosy Eradication Programme, high endemic areas are being covered by establishment of special leprosy units and centres and moderate and low endemic areas by General Health Services for which supply of anti-leprosy drugs and training of personnel are provided to the States and voluntary organisations. Multi-drug therapy is being introduced in high endemic districts in a phased manner.

Annexure

State-wise prevalence rate of leprosy per thousand in India

State/U.Ts.	Prevalence rate of leprosy per thousan	
	as per 1971 census	as per 1981 census
1	2	3
1. Andhra Pradesh	14·45	11·72
2. Assam	0·82	0·75
3. Bihar	6·02	5·43
4. Gujarat	2·02	2·93
5. Haryana	0·10	0·07
6. Himachal Pradesh	4·34	1·64
7. Jammu and Kashmir	1·08	0·83

1	2	3
8. Karnataka	5·94	5·98
9. Kerala	3·51	2·95
10. Madhya Pradesh	0·77	2·30
11. Maharashtra	5·55	6·37
12. Manipur	5·59	4·23
13. Meghalaya	5·93	4·55
14. Nagaland	9·69	6·49
15. Orissa	10·80	12·14
16. Punjab	0·15	1·19
17. Rajasthan	0·39	0·29
18. Sikkim	7·66	5·00
19. Tamil Nadu	19·01	15·14
20. Tripura	6·43	4·88
21. Uttar Pradesh	1·90	3·79
22. West Bengal	8·58	7·88
23. A. & N. Islands	8·70	5·26
24. Arunachal Pradesh	2·14	1·59
25. Chandigarh	—	—
26. D. and N. Haveli	1·35	1·00
27. Delhi	0·25	0·16
28. Goa, Daman and Diu	5·83	4·59
29. Lakshadweeep	31·25	25·00
30. Mizoram	3·01	2·04
31. Pondicherry	40·25	31·66
	5·93	5·77

गंगा नदी पर रेल पुल का निर्माण

1585. **श्री राम भगत पासवान :** क्या रेल मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या यह सच है कि गंगा नदी पर महात्मा गांधी सेतु बन जाने के बाद से अधिकांश लोग बस द्वारा उत्तर बिहार की यात्रा करते हैं ;

(ख) यदि हां, तो इस से रेलवे को प्रतिमाह कितना घाटा हो रहा है ;

(ग) सरकार ने रेल सेवा को सुवि धाजनक बनाकर बस के समानुसार बनाने